PTC/SB/06 (08-03)

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	Substitute for Form PTO-875							Application or Docket Number			
			AS FILE( Column 1)	PARTI	(Column 2)	SMALL	. ENTITY	OR		R THAN ENTITY	
	FOR	NI	MBER FILE	) NUI	ABER EXTRA	RATE	FEE	1	RATE	FEE	
	BASIC FEE (37 CFR 1.16(a))						5	OR	10.12	5	
	TOTAL CLAIMS (37 CFR 1.16(c))	3	3/minus	20 =		xs =	1	1	x : -	<del>                                     </del>	
	INDEPENDENT ( (37 CFR 1.18(b))	LAIMS	minus 3 =			X \$_ =	<del>                                     </del>	OR	-	<del> </del>	
	MULTIPLE DEPE	NOENT CLAIM PRE	LAIM PRESENT (37 CFR			+5	<del>                                     </del>	OR		<del> </del>	
	* If the difference in column 1 is less than zero, enter "0" in column 2.						<b> </b>	OR	<u> </u>		
	CLAIMS AS AMENDED - PART II					TOTAL	L	OR	TOTAL		
1		(Column 1)			(Column 3)	SMALL	ENTITY	OR		R THAN ENTITY	
NO	± A	CLAIMS REMAININ AFTER	3	HIGHEST NUMBER PREVIOUSL	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI-	
11/1/6/	Total	AMENDMEN	) Minus	PAID FOR	> -		FEE			FEE TIONAL	
`\	Total Or cFR 1.16(c Z Independent U (37 cFR 1.1et)	» <del>                                    </del>	Minus	12		X \$=		OR	x s=		
V	(37 CFR 1.180)	<u>"                                    </u>	milus	1 9	4.	X \$=		OR	x s=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5		OR	+s=		
	Glas	11				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	X[3]	(Calumn 1)		(Column 2)	(Column 3)			•			
	m 7	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-	'	RATE	ADDI-	
	Total (37 CFR 1.18(c) Z Independent (37 CFR 1.18(b)	AFTER AMENDMEN	r	PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE			TIONAL FEE	
Ì	Total (37 CFR 1.16(c)	1./0	euniM	33	*	X 8		OR	x s =		
ı	Independent (37 CFR 1.160)		Minus	<i>"4</i>	"	x s=		OR	x s =		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+5=		OR	+s =	$\overline{}$	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	$\overline{}$	
	(Column 1) (Column 2) (Column 3)										
	U L	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
l	Total (37 CFR 1.18(e))	AMENDMEN	Minus	PAID FOR	=		FEE			FEE	
1	Z Independent	1.	Minus	199	-	X \$=		OR	X \$=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$=		OR	X \$=		
ľ	1					TOTAL		OR	TOTAL		
	• If the entry in	column 1 is less t	nan the entr	y in column 2, wr	ite "0" in column 3.	ADD'L FEE		OR	ADD'L FEE		
	THE THISTIES	st Number Previou It Number Previou	ly Paid For	IN THIS SPACE	is less than 3 ent	or "3"					
L.	ine riignest	Number Previous	Paid For (	Total or independ	dent) is the highes	t number found in I	the appropriate	box in co	olumn 1.		

This collection of information is required by 37 CFR 1.16. The information is required to obtain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.